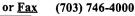


## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450





INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

Daniel N. Christus Wallenstein & Wagner, Ltd. 53rd Floor 311 South Wacker Drive Chicago; IL 60606-6630



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name)	<b>.</b>	nberge	isę	. Wei	e M.	Ju1i
(Signature)	olvalv.	eisen		M.	للا	フ
(Date)			4	2004	20,	May

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/989,320	11/20/2001	Michael M. Barlow	532 P 058	9968

TITLE OF INVENTION: HIGH CAPACITY PORTABLE EXCHANGE SINGLE BED DEIONIZER

APPLN. TYPE	SMALL ENTITY	ISSUE F	JE FEE PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665		\$300	\$965	08/06/2004
EXAN	MINER	ART UN	іт	CLASS-SUBCLASS	7	
BARRY, C	CHESTER T	1724		210-288000		
CFR 1.363).  Change of correspond Address form PTO/SB/1  "Fee Address" indicati	e address or indication of "F ence address (or Change of C 22) attached. ion (or "Fee Address" Indica or more recent) attached. Us	Correspondence	names of up agents OR, alt firm (having a agent) and the	on the patent front page to 3 registered patent ternatively, (2) the name as a member a registered c names of up to 2 registered gents. If no name is listered	attorneys or 1 Rockey of a single l attorney or 2 stered patent	tein Wagner & y, Ltd.
(A) NAME OF ASSIGN Calco, Ltd	EE		) RESIDENCE: (	CITY and STATE OR CO		. ·
Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the patent	t); 🔾 individual 💍	corporation or other private g	oup entity  governme
a. The following fee(s) are	enclosed:	4b	Payment of Fee(	,		
¥ Issue Fee				amount of the fee(s) is er		
Publication Fee	☐ Payment by credit card. Form PTO-2038 is attached deficiencies					
☐ Advance Order - # of	Copies	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-0280 (enclose an extra copy of this form).				
Director for Patents is reque	sted to apply the Issue Fee a	nd Publication Fee	(if any) or to re-ap	pply any previously paid	issue fee to the application ide	ntified above.
Authorized Signature	W Winder	(Date)				

05/E5/E004 SDIRETAE 00000088 09989320

01 FC:2501 02 FC:1504 665.00 OP 300.00 DP

SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re	application of	)		
		)		
Mich	ael M. Barlow	)		
		)		
Appl	ication No. 09/989,320	)	Examiner:	Chester T. Barry
Conf	irmation No. 9968	)		
		)	Art Unit:	1724
Filed	November 20, 2001	)		
		)		
For:	High Capacity Portable Exchange Single	)		
	Bed Deionizer	)		

## PAYMENT OF ISSUE AND PUBLICATION FEES

MAIL STOP ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Commissioner:

Enclosed is our Check for \$965 to cover the payment of the Issue and Publication Fees due <u>August 6, 2004</u>. Please charge any additional fees or credit any overpayment to Deposit Account No. 23-0280.

Respectfully submitted,

Date: May 20, 2004

Daniel N. Christus, Registration No. 29,626

Customer No. 23424

WALLENSTEIN WAGNER & ROCKEY, LTD.

311 South Wacker Drive, 53<sup>rd</sup> Floor

Chicago, Illinois 60606-6630

312.554.3300

Attorneys for Applicant

ttorney Docket No. 532 P 058 Application No. 09/989,320 Payment of Issue and Publication Fees Page 2

> I HEREBY CERTIFY THAT THIS PAPER AND ACCOMPANYING DOCUMENT AND FEE IS BEING DEPOSITED WITH THE U.S. POSTAL SERVICE AS FIRST CLASS MAIL IN A PRE-PAID ENVELOPE ADDRESSED TO MAIL STOP ISSUE

FEE, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON MAY 20, 2004.